Indiana State Department of Health

Vaccine E-Letter # 18
6/21/02

Four Day Grace Period

The long awaited ACIP recommendations were published February 8, 2002 in the MMWR. The ISDH Immunization Program staff have been discussing the recommendation.

The actual wording is……"…administering a dose a limited number of days earlier than the minimum interval or age is unlikely to have a substantially negative effect on the immune response to that dose. Therefore, ACIP recommends that vaccine doses administered <_ 4 days before the minimum interval or age be counted as valid"*****

Their recommendation contains a footnote: * "In certain situations, local or state requirements might mandate that doses of selected vaccines be administered on or after specific ages. For example, a school entry requirement might not accept a dose of MMR or varicella vaccine administered before the child's first birthday. ACIP recommends that physicians and other health-care providers comply with local or state vaccination requirements when scheduling and administering vaccines."

Indiana Legal Citations

Rule 1. Immunization of School Children

410 IAC 1-1-1 Immunization Requirements
Authority: IC 20-8.1-7-9.5
Affected: IC 20-8.1-7

IC.20-8.1-7-9.5
(d.) The state department of health shall adopt rules under IC 4-22-2 specifying the:
(1) required immunizations;
(2) child's age for administering each vaccine;
(3) adequately immunizing doses; and
(4) method of documentation of proof of immunity.

The ISDH Immunization Program proposes adopting the "4-day grace period" recommended by ACIP for **'specific and limited'** usage only. **This does not change nor alter the recommended minimal intervals and should not be viewed as a change in practice.** This acceptance and application would be applied to **school entry requirements, day care centers, Headstart centers, WIC participants, and TANF recipients.** This will allow for school administrators to legally admit children into school, without placing other children at risk. It will assist medical providers in managing their vaccine supply by reducing re-administration of vaccines that are already in short supply.